

SO YOU WANT TO BE A STATE OFFICER? 2011-2012

Being a State Officer of the New York State Association of Family, Career and Community Leaders of America provides the opportunity for personal growth and leadership development. It is an honor and a rewarding experience. It carries the responsibility of representing all chapters in your district and requires a serious commitment of time, energy and support. Because of the State Meeting schedule and responsibilities, a State Officer may not participate in a STAR event during the State Meeting of his/her tenure year.

2011-2012 State Officers are required to attend:

Summer Leadership Training	SUNY, Oneonta	July 26-29, 2010
Fall Planning Meeting	Sheraton Syracuse University	October, 2010
State Leadership Conference	Sheraton Syracuse University	March 30-April 2, 2011
National Leadership Meeting	Anaheim, CA	July 10-14, 2011
Summer Leadership Training	SUNY, Oneonta	July, 2011
Fall Planning Meeting	TBD	Fall, 2011
Rehearsal	TBD	March/April, 2012
State Leadership Conference	TBD	March/April, 2012

District Leadership functions Scheduled throughout term of office

Officers will be given the use of the official FCCLA red blazer while representing New York State. The blazer will serve as part of an official uniform and is to be worn whenever officers represent the organization in an official capacity. A deposit of 50% of the current cost of a new jacket will be required. If the officer opts to keep the jacket, the cost will be the deposit. The deposit, minus \$10 cleaning fee, will be returned upon return of the jacket.

Before obtaining the necessary signatures for the State Officer form, be sure your parents, advisor, and school district's administrator understand the time, energy and financial obligations involved in your becoming a State Officer.

ADVISORS

It is expected that advisors will attend and participate in the meetings listed above and assume various advisor responsibilities.

2011-2012 STATE OFFICER PERSONNEL PROFILE
New York State Family, Career and Community Leaders of America

STUDENT: Type or print information. Return completed form to your **District Advisor**

DISTRICT ADVISOR: Return to **Karen Thomas**, PO Box 288, Brownville, NY 13615

OFFICER _____ Date of birth _____

Address _____

Phone _____ E-mail _____

Parent(s) _____

Membership in FCCLA (circle grades) 6 7 8 9 10 11

Present year in school _____ Approximate cumulative scholastic average _____

Enrolled in Family and Consumer Science class: (circle) 5 6 7 8 9 10 11

Current Family and Consumer Science course(s): _____

FCCLA Committees/Special contributions _____

Local offices _____

District offices _____

Leadership Training _____

School/Community activities _____

Home/Family Responsibilities _____

Hobbies/special interests _____

Plans for the future _____

Attach a statement describing your goals as a State Officer

As a State Officer, I promise to abide by the FCCLA code of conduct, uphold the purposes of the organization, and follow through on my commitment to FCCLA. I understand that if I do not attend all the following required meetings without good reason and without notifying the state officer trainer and state coordinator, I may be removed from office.

2010 Summer Leadership Training
2010 Fall Planning Meeting
2011 State Leadership Meeting
2011 National Leadership Meeting

2011 Summer Leadership Training
2011 Fall Executive Council Meeting
2012 Rehearsal
2012 State Leadership Meeting

District functions and other meetings of my office

Officer Signature _____ Date _____

My son/daughter has my permission to accept all the responsibilities of an officer of New York State Family, Career and Community Leaders of America.

Parent /Guardian Signature _____

SCHOOL

Address _____

Phone _____ Fax _____

I recognize that being a state officer requires both the student and advisor to attend State and National meetings, and I agree to support this nomination:

Administrator Signature _____

ADVISOR

Address _____

Phone _____ E-mail _____

Chapter affiliated _____ 2009-2010 _____ 2008-2007 _____ 2007-2008

I recognize that this nomination requires the attendance and active participation of both student and advisor at the State and National meetings listed above. I agree to accept these responsibilities.

Chapter Advisor _____

District Advisor approval _____ District _____

